## **RELEASE OF AUTHORITY FOR CANCELLATION**

TO: Washington Utilities and Transportation Commission

Licensing Services P.O. Box 47250

Olympia, WA 98504-7250 (360) 664-1222 or fax @ (360) 586-1181 G\_\_\_\_\_ C \_\_\_\_ CH/ES (H-6726) The undersigned, holder of Permit/certificate number(s): CC\_\_\_\_\_ HG\_\_\_\_ TCC\_\_\_\_ OTHER Does hereby declare that the authority is no longer being used and is hereby surrendered to the Commission for cancellation. (Attach original permit or certificate, if available) > Effective fore! SIGNATURE OF CARRIER PenInsula Trips LLC Owner, Thomas Form NAME OF CARRIER (Please print) 356 Freshwater PACK ADDRESS Port Angeles, WA 98363 (360) 457-2259 (AREA CODE) - PHONE NUMBER